



Minutes of a meeting of the Adults and Communities Overview and Scrutiny Committee held at County Hall, Glenfield on Tuesday, 3 September 2013.

PRESENT

Mrs. R. Camamile CC (in the Chair)

Mr. M. H. Charlesworth CC

Ms. Betty Newton CC

Mr. S. J. Hampson CC

Mr. A. E. Pearson CC

Mr. J. Kaufman CC

Mr. R. Sharp CC

Mr. P. G. Lewis CC

In Attendance.

Ms Fiona Barber, Healthwatch Leicestershire (Minutes 10, 11 and 12 refer)

Mrs J A Dickinson CC, Cabinet Support Member for Adult Social Care, Leicestershire County Council (minutes 10 and 11 refer)

1. Appointment of Chairman.

RESOLVED:

That the appointment of Mrs R Camamile CC as Chairman of the Adults and Communities Overview and Scrutiny Committee for the period ending with the Annual Meeting of the County Council in 2014 be noted.

2. Appointment of Deputy Chairman.

RESOLVED:

That Mr R Sharp CC be appointed Deputy Chairman of the Adults and Communities Overview and Scrutiny Committee for the period ending with the Annual Meeting of the County Council in 2014.

3. Minutes

The minutes of the meeting held on 11 March 2013 were taken as read, confirmed and signed.

4. Question Time.

The Chief Executive reported that no questions had been received under Standing Order 35.

5. Questions asked by members under Standing Order 7(3) and 7(5).

The Chief Executive reported that no questions had been received under Standing Order 7(3) and 7(5).

6. Urgent Items.

There were no urgent items for consideration.

7. Declarations of interest.

The Chairman invited members who wished to do so to declare any interest in respect of items on the agenda for the meeting.

Mr P G Lewis CC declared a personal interest in the item entitled 'Development of a Revised Prevention and Early Intervention Offer' as Secretary of Human Rights and Equalities Charnwood (minute 10 refers).

Ms Betty Newton CC declared a personal interest in the item entitled 'Development of a Revised Prevention and Early Intervention Offer' as a member of Human Rights and Equalities Charnwood (minute 10 refers). She also declared a personal interest in the item entitled 'Strategic Review of Adult Mental health Preventative Services in Leicestershire' as her daughter worked as a mental health nurse at University Hospitals of Leicester NHS Trust (minute 11 refers).

Mr A E Pearson CC declared a personal interest in the item entitled 'Development of a Revised Prevention and Early Intervention Offer' as a member of Friends of Gretton Court (minute 10 refers).

Mr S J Hampson CC declared a personal interest in the item entitled 'Development of a Revised Prevention and Early Intervention Offer' as he had supplied goods to Advance Housing & Support (minute 10 refers).

8. Declarations of the Party Whip in accordance with Overview and Scrutiny Procedure Rule 16.

There were no declarations of the party whip.

9. Presentation of Petitions under Standing Order 36.

The Chief Executive reported that no petitions had been received under Standing Order 36.

10. Development of a Revised Prevention and Early Intervention Offer.

The Committee considered a report of the Director of Adults and Communities which advised members on the development of a revised prevention and early intervention offer within the Adults and Communities Department. A copy of the report marked 'Agenda Item 10' is filed with these minutes.

The Chairman welcomed Mrs J Dickinson CC, Cabinet Support Member for Adult Social Care, to the meeting for this and other items. Mrs Dickinson noted that the revised prevention and early intervention offer would allow opportunity for a more detailed and focused commissioning process. It would also need to provide value for money. The timetable for the development of the new proposals gave sufficient opportunity to ensure that the revised offer would be robust. Through this timetable the Committee would be given further opportunity to comment on the proposals.

Written comments on the development of a revised prevention and early intervention offer had been received from Healthwatch Leicestershire, a copy of which is filed with these minutes. With consent of the Chairman, Ms Fiona Barber spoke on behalf of Healthwatch Leicestershire and acknowledged that the appropriate level of early intervention varied between communities. It was often older people who needed the most care and knowing at what point to put prevention and early intervention in place could be challenging.

Arising from discussion the following points were raised:-

- (i) The Committee welcomed the consultation that was to be undertaken with those organisations which currently held contracts with Leicestershire County Council (LCC) that formed part of the newly defined Early Intervention and Prevention proposals;
- (ii) It was suggested that the membership of the Prevention Advisory Board, which currently comprised of County Council officers, should be amended to include an external representative to act in a critical friend role. It was explained that the Board had only met once and that its membership would be revised on a regular basis. Consideration would also be given to including a representative from Healthwatch. However, it was recognised that the Board could not represent all stakeholders. A number of different engagement exercises were planned to ensure that all appropriate groups had their views and specific needs identified, which could result in the establishment of other stakeholder groups;
- (iii) Identifying the possible consequences of the removal of funding for lower priority services would be essential to avoid the need for more intensive care and support services in the future. As a result, risk assessments were being carried out as a central part of the review process;
- (iv) Referrals to prevention and early intervention services came through various streams. Often referrals were made by GPs or Social Workers; there were also cases of self-referral. It was intended that the referral process would be clearer and more methodical as a result of the review. The review would also target people requiring services so they were made aware and had access to them. Difficult to access groups such as rural and Black Minority Ethnic (BME) communities required appropriate in-reach programmes. The County Council operated a First Contact Scheme and offered signposting, information and advice services to help ensure that people were channelled into the right services;
- (v) The Committee noted that it was often easier for County residents who lived in the greater Leicester area to access services in the City and the County Council needed to ensure that arrangements were in place so that residents had access to City services where appropriate. It was explained that funding from the County and City for services was pro-rata to the population served. Often organisations were centrally located in the City but supported County residents. The County Council would need to be aware of the impact on the City if County funding was withdrawn;
- (vi) The Committee requested that information be provided on discreet procurement packages as referred to in the report Appendix. It was explained that some services provided through prevention and early intervention already formed part

of a discreet procurement package. Some services had recently been commissioned and others would be reviewed when their contract expired;

- (vii) It was suggested that although the proposed consultation took account of the views of commissioners, it did not adequately seek to consult with service users. However, it was explained that the consultation would not be focused on reviewing individual services and users but instead be strategic in nature, identifying where to target future service and where investment should lie;
- (viii) Revised prevention and early intervention services would better allow the County Council to control the demand for personal budgets as these services were used as a means of avoiding the need for more resource intensive social care. It was expected that the new model for services would deliver better outcomes and reduce costs;
- (ix) It was explained to the Committee that Lunch Clubs were based in local venues around the County and were set up to provide balanced and affordable meals in local community settings, often transport was also provided to the venue. Lunch Clubs run by the County Council were open to any resident over the age of 50. The review would consider the best way to deliver these services in the future;
- (x) Concern was expressed by the Committee that some contract providers would need to seek alternative funding streams if their contracts with the County Council were altered or discontinued. It was explained that the County Council would need to review how its funding was being used to deliver the best outcomes going forward. Partnership working with the districts would be essential in ensuring that all resources were used to best effect. Appropriate communication would be vital in ensuring that the public were engaged with the review effectively.

#### RESOLVED:

- a) That the report be noted;
- b) That a further report be submitted to this Committee in the spring as part of the consultation process;
- c) That information on discreet procurement packages be circulated to members of the Committee.

#### 11. Strategic Review of Adult Mental Health Preventative Services in Leicestershire.

The Committee considered a report of the Director of Adults and Communities which sought the Committees views on the Strategic Review of Adult Preventative Mental Health Services in Leicestershire and the implementation of the proposed service re-design to the Voluntary Service Officers (VSOs) Service. A copy of the report marked 'Agenda Item 11' is filed with these minutes.

The Cabinet Support Member for Adult Social Care, Mrs J Dickinson CC, spoke in support of the review, acknowledging that current services were already well received. Any future services would need to build on the good work that had already been undertaken through the current service.

Written comments on the Strategic Review of Adult Preventative Mental Health Services in Leicestershire and the implementation of the proposed service re-design to the Voluntary Service Officers (VSOs) Service had been received from Healthwatch Leicestershire, a copy of which is filed with these minutes. These comments would be forwarded to the Cabinet as part of the consultation process.

Arising from discussion the following points were noted:-

- (i) It was noted that NHS Commissioners were currently working with LCC to find the best way to deliver mental health services. By investing more in preventive services this would help to decrease the pressure on acute services. Areas where the CCG's could jointly invest with local authorities were being identified;
- (ii) The Committee queried the comparatively high costs for services provided by the Adhar Project. The purpose of the Adhar Project was to promote mental health access and it was likely that this was why individual costs were higher;
- (iii) The Committee suggested that service users currently accessing befriending and social drop in services represented a potential hard to reach group due to their relative isolation. As such, issuing letters outlining the consultation might not be the most effective way to engage with these groups. However, it was explained that service providers were being used as a conduit better to access users. One to one meetings had been offered to users and, through providers, those in receipt of services were offered assistance in filling out the consultation questionnaire;
- (iv) It was noted that befriending services were only accessed by a small number of service users and were not cost effective. However, there was a lack of direct feedback from service users regarding the benefits of the service which made it difficult for the County Council to be sure that the new service would provide the same benefits. The Committee was assured that service users would be assisted during transition to the new service by the inclusion support service and mental health facilitators. The new outcomes framework for prevention services would also identify where services were not working and enable officers to consider different ways of delivering the service to meet people's outcomes;
- (v) The Committee was of the view that, despite the challenges, it would be important to ensure that BME communities were able to access a more inclusive service. Most service users had welcomed the proposals for a more integrated approach to services. Integrated services would ensure that all areas of the County had access to the same level of services and would cut across cultural boundaries. All communities and groups would need to be encouraged to use the new services. It was suggested that the Committee receive further information on engagement with BME groups at a future meeting;
- (vi) Social drop in and befriending services were vital but management could be improved. Members of the Committee expressed different opinions with regards to the proposed commissioning of services based on district geographical areas. Some members of the Committee supported this approach as it would ensure that individual district profiles were accounted for and specific local needs were met in delivering services. Other members of the

Committee suggested that services could be delivered through one County wide service, which would allow for a more joined up and consistent approach to service delivery. It was suggested that further consideration be given to this issue during the consultation so that the Cabinet was able to decide on the right approach;

- (vii) Transportation would form part of the procurement process for new social drop in and befriending services. Potential providers would need to consider how to address the barriers of accessing services at various locations across the County given that many people currently in receipt of services were relatively isolated.

RESOLVED:

- a) That the report be noted;
- b) That the comments now made be drawn to the attention of the Cabinet;
- c) That a report on BME engagement be submitted to a future meeting of this Committee.

12. Adult Social Care Annual Complaints and Commendations Report 2012-13.

The Committee considered a report of the Director of Adults and Communities which provided a summary of the complaints and commendations for Adult Social Care Services commissioned or provided by the Adults and Communities Department in 2012/13. A copy of the report marked 'Agenda Item 12' is filed with these minutes.

Written comments on the Annual Adult Social Care Complaints and Commendations Report 2012-13 had been received from Leicestershire Healthwatch, a copy of which is filed with these minutes. The comments would be considered by the Customer Relations Manager and responded to appropriately.

Arising from discussion the following points were noted:-

- (i) It was explained to the Committee that complaints had risen in 2012/13 over the previous year partly due to the Adults and Communities Department more effectively encouraging feedback from service users and better capturing complaints. The complaints service was now more visible and the Department was continuously improving how it analysed complaints;
- (ii) A complaint was defined as 'any expression of discontent, no matter how expressed'. Management teams were given the opportunity to resolve any issue locally before it was logged as an official complaint;
- (iii) The Committee noted that complaints lodged against service delivery were comparatively high. It was explained that service delivery covered a very broad area and this resulted in a number of complaints being placed in this category. It was hoped that in future reports this category would be re-classified to allow for a more descriptive account of the complaints received;

- (iv) There had been a reduction in service users for adult social care services over the previous year of approximately 900 people;
- (v) It was noted that complaints had gone up approximately 50% over the previous year, this equated to 0.93% of service users making a complaint. The Committee queried whether this was a satisfactory level of complaints. It was explained that it would require several years of data to be able to benchmark complaints effectively. However, it had been noted that other local authorities had experienced much higher levels of complaints. Also, changes to community care finance had resulted in a high number of complaints and this accounted for some of the increase. How well the Department had performed with regards to complaints had been based on three criteria:-
- Better response times to complaints;
  - Fewer complaints referred to the Ombudsman;
  - Increase in the number of commendations.
- (vi) The Committee suggested that table three in the report added little value as it did not clearly show the number of complaints received in relation to population size. It was suggested that more context should be given, such as reflecting the different population sizes in the districts and showing complaints received per resident, and the information should generally be presented in a way that added value to the exercise;
- (vii) It was noted that the complaints figures referred to in the report included some cases where a change in policy had resulted in a service reduction.

RESOLVED:

That the report be noted.

13. Date of next meeting.

It was noted that the next meeting of the Committee would be held on 26 November at 2pm.

2.00 - 3.50 pm  
03 September 2013

CHAIRMAN

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